

Premium Conversion

Upon enrollment, you are automatically set up to have your health insurance premiums paid on a pre-tax basis. If you do not wish to have premiums deducted on a pre-tax basis, you must sign the "Post Tax Request Form". You may find this form on the web site at <http://kehpn.ky.gov> or you may contact the DEI.

Employee Contributions

Monthly Employee Contribution* – Non-Smoker

	Single	Parent Plus	Couple	Family	Family** Cross- Reference
Commonwealth Essential	Not offered	\$58.26	\$274.90	\$339.12	\$0
Commonwealth Enhanced	\$0	\$120.76	\$378.92	\$454.72	\$10.30
Commonwealth Premier	\$19.28	\$180.48	\$422.30	\$502.90	\$35.04
Commonwealth Select	\$0	\$92.88	\$285.54	\$341.58	\$7.74

Monthly Employee Contribution* – Smoker

	Single	Parent Plus	Couple	Family	Family** Cross- Reference
Commonwealth Essential	Not offered	\$90.04	\$306.68	\$370.90	\$15.88
Commonwealth Enhanced	\$15.88	\$152.54	\$410.70	\$486.50	\$26.18
Commonwealth Premier	\$35.16	\$212.26	\$454.08	\$534.68	\$50.92
Commonwealth Select	\$12.50	\$117.32	\$309.48	\$365.46	\$19.66

* Contribution is per employee

** Refer to page 73 of the 2007 Health Insurance Handbook for additional information on this payment option.